PTO/SB/22 (10-00)

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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) Docket Number (Optional) 31869-190915 | | | |
|--|---|----------------------------------|--------------------|
| OIPE | In re Application of Masashi TAKADA | | |
| | Application Number 10/618,591 Filed July 15, 2003 | | |
| MAR 0 3 2005 (S) | For ECHO CANCELER WITH ECHO PATH CHANGE DETECTOR | | |
| TRADEMINATED | Group Art Unit 2644 | Examiner Walter F. Briney III | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application. | | | |
| The requested extension and appropriate non-small-entity fee are as follows (check time period desired): | | | |
| | | | \$ <u>120</u> |
| ☐ Two months (37 CFR 1.17(a)(2)) | | | \$ |
| ☐ Three months (37 CFR 1.17(a)(3)) | | | \$ |
| Four months (37 CFR 1.17(a)(4)) | | | \$ |
| Five months (37 CFR 1.17(a)(5)) | | | \$ |
| Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown | | | |
| above is reduced by one-half, and the resulting fee is: \$ A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Commissioner has already been authorized to charge fees in this application to a Deposit Account. The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 22-0261. I have enclosed a duplicate copy of this sheet. I am the applicant/inventor. | | | |
| ☐ assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | |
| attorney or agent of record. | | | |
| | | | |
| Registration number if acting under 37 CFR 1.34(a). 33,074. | | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. March 3, 2005 | | | |
| Date Signature J | | | |
| | Catherine M. Voorhees | | |
| | | Туре | ed or printed name |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple | | | |
| forms if more than one signature is required, see below*. | | | |



SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.